

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**

GF-3943

(Inmate Number)

Mr. Tyree Bowie

(Name of Plaintiff)

1000 Follies Road, Dallas, PA 18612

(Address of Plaintiff)

vs.

Superintendnet Wynder, et. al.

(Case Number)

1: CV 07-0747

COMPLAINT

FILED
SCRANTON

APR 23 2007

(Name of Defendants)

TO BE FILED UNDER:

42 U.S.C. § 1983 – STATE OFFICIALS

PER
DEPUTY CLERK

42 U.S.C. § 1331 – FEDERAL OFFICIAL

I. Previous Lawsuits

A. If you have filed any other lawsuits in federal court while a prisoner please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

NONE

II. Exhaustion of Administrative Remedies

A. Is there a grievance procedure available at your institution?

Yes _____ No _____

B. Have you filed a grievance concerning the facts relating to this complaint?

Yes _____ No _____

If your answer is no, explain why not _____

C. Is the grievance process completed? Yes _____ No _____

III. Defendants

(In Item A below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use Item B for the names, position and places of employment of any additional defendants.)

James Wynder

A. Defendant _____ is employed
as Superintendent at SCI-Dallas, 1000 Follies Road
Dallas, PA 18612

B. Additional defendants To be determined once "discovery" is completed.

IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any case or statutes. Attach extra sheets if necessary.)

1. Around August 12, 2005, while sleeping in the top bunk of the bed at SCI-Dallas. I fell out and smashed my face into the steel desk next to the bunk bed. I suffered 14 stitches in my face and broke my nose. My nose is now "off track" and I often get nose bleeds, and clogged breathing which makes it hard to breath. The Superintendent at SCI-Dallas was well aware of other inmates falling off of the top bunks. There were "no" way to get on or off of the high bunks, no ladders, stools, or step ladders to help inmates get on or off the top bunk. In 2005 inmates have been known to get hurt and break bones falling off of the top bunk. But the Superintendent after knowledge acted with deliberate indifference to these serious dangers. Inmates fell "prior" to me falling, no memo was issued or warning sign placed in cells about the dangers. I exhausted the grievance system which the Superintendent denied. Other prisons like SCI-Huntingdon has "safety" rails on the top bunks and ladders. SCI-Dallas installed ladders "after" I fell, but they still do "not" have safety rails to stop other inmates from falling.
2. _____
3. _____

V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. PAY ME \$500,000 in punative damages, and \$500,000 in compensatory damages (for a total of one-million dollars).

2. _____

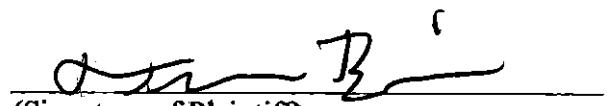
3. _____

Signed this 9 day of April, 2007.


(Signature of Plaintiff)

I declare under penalty of perjury that the foregoing is true and correct.

April 9, 2007
(Date)


(Signature of Plaintiff)

COVER SHEET

THIS COVER SHEET CONTAINS IMPORTANT INFORMATION ABOUT FILING A COMPLAINT AND YOUR OBLIGATIONS IF YOU DO FILE A COMPLAINT. READ AND COMPLETE THE COVER SHEET BEFORE YOU PROCEED FURTHER.

The cost for filing a civil rights complaints is \$350.00.

If you do not have sufficient funds to pay the full filing fee of \$350.00 you need permission to proceed *in forma pauperis*. However, the court will assess and, when funds exist, immediately collect an initial partial filing fee of 20 percent of the greater of:

- 1) the average monthly deposits to your prison account for the past six months; or
- 2) the average monthly balance in your prison account for the past six months.

Thereafter, the institution in which you are incarcerated will be required to make monthly payments of 20% of the preceding month's deposits credited to your account until the entire filing fee is paid.

CAUTION: YOUR OBLIGATION TO PAY THE FULL FILING FEE WILL CONTINUE REGARDLESS OF THE OUTCOME OF YOUR CASE, EVEN IF YOUR COMPLAINT IS DISMISSED BEFORE THE DEFENDANTS ARE SERVED.

1. You shall file a complaint by completing and signing the attached complaint form and mailing it to the Clerk of Court along with the full filing fee of \$350.00. (In the event attachments are needed to complete the allegations in the complaint, no more than three (3) pages of attachments will be allowed.) If you submit the full filing fee along with the complaint, you **DO NOT** have to complete the rest of the forms in this packet. Check here if you are submitting the filing fee with the complaint form. _____

2. If you cannot afford to pay the fee, you may file a complaint under 28 U.S.C. § 1915 without paying the full filing fee at this time by completing the following: (1) Complaint Form; (2) Application To Proceed In Forma Pauperis; and (3) Authorization Form. You must properly complete, sign and submit all three standard forms or your complaint may be returned to you by the Clerk of Court. Check here if you are filing your complaint under 28 U.S.C. § 1915 without full prepayment of fees. _____

Please Note: If your case is allowed to proceed and you are awarded compensatory damages against a correctional facility or an official or agent of a correctional facility, the damage award will first be used to satisfy any outstanding restitution orders pending. Before payment of any compensatory damages, reasonable attempts will be made to notify the victims of the crime for which you were convicted concerning payment of such damages. The restitution orders must be fully paid before any part of the award goes to you.

DO NOT DETACH THE COVER SHEET FROM THE REST OF THE FORMS

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NAME Mr. Tyree Bowie

NUMBER GF-3943

State Correctional Institution at Dallas
1000 Follies Road
Dallas, Pennsylvania 18612

INMATE MAIL
PA DEPT. OF CORRECTIONS
United States District Court,
Middle District of Pennsylvania
Clerk of Court - Mary E. D'Andrea

U.S. Post Office & Court House
Scranton, PA 18501

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MARY E. D'ANDREA, CLERK
PA DEPT. OF CORRECTIONS